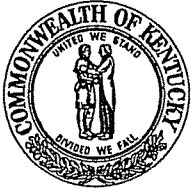


CABINET FOR FAMILIES AND CHILDREN

DEPARTMENT FOR SOCIAL INSURANCE

"An Equal Opportunity Employer M/F/D"



DIVISION OF CHILD SUPPORT ENFORCEMENT

KASES Network Memo No. 45

TO: Staff, Division of Child Support Enforcement
All IV-D Agents

DATE: June 5, 1997

SUBJECT: New Subaccounts

Three new current support subaccounts have been added to KASES. There are now a total of four current support subaccounts: Current Child Support (CSUP), Current Child Support SSI Child (CSSI), Current Medical Support (CSMS), and Current Spousal Support (CSSP).

The addition of the new subaccounts will drastically change some of the procedures on KASES. In most instances, the new current support subaccounts will eliminate the need for creating duplicate cases.

ADDING SUPPORT ORDERS

CSUP is the amount of current child support ordered in an administrative or judicial support order.

CSSI is the amount of child support ordered in an administrative or judicial support order and the Division of Child Support Enforcement (DCSE) determines the child is receiving Supplemental Security Income (SSI) due to the child's disability. If a child is receiving SSI and there are other children in the child support case, then caseworkers prorate the obligation amount to determine the amount of child support belonging to the SSI child. Instead of creating a second case for the SSI child, caseworkers enter the child support for the SSI child as CSSI. This allows the custodial parent (CP) to receive the child support for the SSI child even when the other children are receiving a grant through the Kentucky Transitional Assistance Program (K-TAP).



June 5, 1997

Page Two

Note: A support order should not actually order CSSI. Caseworkers make the determination if the child is receiving SSI and if a CSSI subaccount should be created. **The CSSI subaccount must always have the same frequency and start date as the CSUP subaccount.**

Previously, when a K-TAP CP had a child who received SSI because of the child's disability, an additional case was created so the CP could receive the SSI child's portion of child support. With the creation of the CSSI subaccount, a second case will no longer be necessary. Even if the case is in an AFDC IV-D status, the payee of the CSSI subaccount will be the active CP.

When creating a CSSI subaccount, the order is prorated to determine what portion of the child support obligation is entered as CSUP and what portion is entered as CSSI.

CSMS is a specified dollar amount and frequency ordered in a judicial support order for payment of health insurance premiums to the CP. When a noncustodial parent (NCP) or obligor has been ordered to pay a specified dollar amount for medical support, this amount is entered into the system as CSMS. For example, the support order states "the defendant is to pay to the plaintiff \$50.00 per month for the purchase of a medical insurance policy." A CSMS subaccount with an obligation of \$50.00 and a frequency of monthly (MNTH) is created.

CSMS must not be confused with the Medical Arrears (MEDIA) subaccount that is currently available on KASES. The MEDIA subaccount is used to enter court ordered arrearages owed to Medicaid for reimbursement of medical and birthing expenses. The Cabinet for Families and Children (CFC) must be payee for medical arrearages. For example, the order states "the defendant shall reimburse the Cabinet for Families and Children for expenditures for the prenatal care and birth of the child in the amount of \$1,500.00." A MEDIA subaccount is created with a balance of \$1,500.00.

Note: KASES Network Memo No. 36 provides information on the MEDIA Subaccount.

When a support order is established stating that medical support arrearages are owed to the CP, then an NPA Medical Support Arrears 1 (MSA1A) subaccount or an AFDC Medical Arrears (AFMSA) subaccount is created. For example, the order states "the defendant shall

June 5, 1997

Page Three

reimburse the plaintiff for medical expenditures in the amount of \$1,000.00." An MSA1A or AFMSA subaccount is created with a balance of \$1,000.00.

CSSP is the amount ordered in a judicial support order for spousal support, maintenance, or alimony. This amount must be separate from child support, included in the same support order, and the CP is receiving IV-D services on behalf of the children whom the child support was ordered for. Before a CSSP subaccount can be created, the CP must have a RELATION TO THE CASE of MOTH, MTAD, FTAD, FTAJ, FTAC, or FTHL. An open CSUP, CSSI, or CSMS subaccount must exist before a CSSP subaccount can be created.

The wording of the order containing spousal support determines if a CSSP subaccount is created. If the order combines "maintenance" with child support, a CSSP subaccount is not created. For example, the order states: "Maintenance and Support for the children in the amount of \$500.00 per month is ordered." In this instance, only a CSUP subaccount is created and the SPOUSAL SUPPORT INDICATOR is left at "N."

When the support order specifically refers to a separate amount for "spousal support", "maintenance", or "alimony," a CSSP subaccount is created. For example, a CSSP subaccount is created if the support order states: "Child support in the amount of \$300.00 per month and spousal support in the amount of \$200.00 per month are ordered." Both CSUP and CSSP subaccounts are created on the same case and the SPOUSAL SUPPORT INDICATOR is left at "N."

When the support order specifically refers to "spousal support" or "alimony" and child support is combined with spousal support in a single obligation amount, the case is referred to the appropriate contracting official to have the obligation amount divided. For example, the support order states: "Child support and spousal support in the amount of \$500.00 per month are ordered." In this instance, a CSUP subaccount is created. A CSSP subaccount is not created until an amended order separating child and spousal support is received. The SPOUSAL SUPPORT INDICATOR is set to "Y."

Since caseworkers no longer create a second case for spousal support, caseworkers must not set the SPOUSAL SUPPORT INDICATOR to "S" (Separate). An "S" code was used when spousal support was ordered as

June 5, 1997

Page Four

a specific amount and a separate case was created. **Caseworkers are to no longer use the "S" code.**

Caseworkers will continue to use the "N" and "Y" SPOUSAL SUPPORT INDICATOR codes. The "N" code is used if no spousal support is ordered or spousal support is ordered but is not entered on KASES as CSUP. Instead it is entered as CSSP. The "Y" code is used if child support and spousal support are ordered in a lump sum amount and entered as CSUP.

Each new current support subaccount has corresponding arrearage subaccounts. These arrearage subaccounts are listed below.

CSSI

SSI1A - SSI 1 Arrears
SSI2A - SSI 2 Arrears
OSSIA - Other State SSI Arrears

CSMS

MSA1A - NPA 1 Medical Support Arrears
AFSMA - AFDC Medical Support Arrears
FCMSA - Foster Care Medical Support Arrears
NFMSA - Non-IV-E Foster Care Medical Support Arrears
MSA2A - NPA 2 Medical Support Arrears
OSNMA - Other State NPA Medical Support Arrears
OSAMA - Other State AFDC Medical Support Arrears
OSFMA - Other State FC Medical Support Arrears

CSSP

SSP1A - NPA Spousal Support Arrears
ASSPA - AFDC Spousal Support Arrears
OSSPA - Other State NPA Spousal Support Arrears
OSASA - Other State AFDC Spousal Support Arrears

The SELECT EXTENSION screen (ASEFOF) has been changed to accommodate the new subaccounts. The Interest Extensions have been removed and added to a new screen, the SELECT EXTENSION screen (ASEFON).

```
ASEFOF      300X008                K A S E S
05/14/97    13:12:42              SELECT EXTENSION
AP NAME                                           MPI#          IV-D#
CL NAME KY FOSTER CARE      SYS ACCT          MPI#          WRKR#
-----
 1 CSUP-CURRENT CHILD SUPPORT                15 NFMSA-NON-IV-E FC MEDICAL ARREARS
 2 CSSI-CURRENT SUPPORT SSI CHILD            16 MEDIA-MEDICAID ARREARS
 3 CSMS-CURRENT MEDICAL SUPPORT              17 APFEA-AP BLOOD TEST FEE
 4 CSSP-CURRENT SPOUSAL SUPPORT              18 OSTNA-OTHR STATE NPA ARREARS
 5 NPA1A-NPA ARREARS                        19 OSSIA-OTHR STATE SSI ARREARS
 6 SSI1A-SSI ARREARS                        20 OSNMA-OTHR STATE NPA MEDICAL ARREARS
 7 MSA1A-NPA MEDICAL SUPPORT ARREARS         21 OSSPA-OTHR STATE NPA SPOUSAL ARREARS
 8 SSP1A-NPA SPOUSAL SUPPORT ARREARS         22 OSTAA-OTHR STATE AFDC ARREARS
 9 AFDCA-AFDC ARREARS                       23 OSAMA-OTHR STATE AFDC MEDICAL ARREARS
10 AFMSA-AFDC MEDICAL SUPPORT ARREARS        24 OSASA-OTHR STATE AFDC SPOUSAL ARREARS
11 ASSPA-AFDC SPOUSAL SUPPORT ARREARS        25 OSTFA-OTHR STATE FC ARREARS
12 FCARA-FOSTER CARE ARREARS                 26 OSFMA-OTHR STATE FC MEDICAL ARREARS
13 FCMSA-FOSTER CARE MEDICAL ARREARS         27 OSFEE-OTHR STATE APFEE
14 NFCRA-NON-IV-E FC ARREARS                 28 VLEX-VOLUNTARY EXCESS
```

ENTER LINE NUMBER TO SELECT TYPE OF NEW EXTENSION: _____

ENTER-SELECT EXTN PF6-SEL INT EXTN

ASEFOF: SELECT EXTENSION - This screen lists the types of extensions (subaccounts) that can be created on KASES. This screen is used to select the extension associated with the support order for the case.

When adding an extension, the system will return an error message at the bottom of the screen if the extension is inappropriate for that particular case type.

The processing option for this screen is shown below.

ENTER-SELECT EXTN - Type the appropriate line number for the selected extension in the ENTER LINE NUMBER TO SELECT TYPE OF NEW EXTENSION field and press ENTER. The Create Order Extension screen (ASEFOG) displays.

PF6-SEL INT EXTN - To add an interest extension to the system, press PF6. The Select Extension screen (ASEFON) displays. See the following page for instructions for completing this screen.

June 5, 1997

Page Six

```

ASEFON                                K A S E S
05/14/97 13:07:25                    SELECT EXTENSION
AP NAME                               MPI#           IV-D#
CL NAME KY FOSTER CARE                SYS ACCT        MPI#           WRKR#
-----
1 NPA1I-NPA ARREARS INTEREST          15 OSNMI-OTHR STATE NPA MEDICAL INTEREST
2 SS1I1-SSI ARREARS INTEREST          16 OSSPI-OTHR STATE NPA SPOUSAL INTEREST
3 MSA1I-NPA MEDICAL ARREARS INTEREST  17 OSTAI-OTHR STATE AFDC INTEREST
4 SSP1I-NPA SPOUSAL ARREARS INTEREST  18 OSAMI-OTHR STATE AFDC MEDICAL INTEREST
5 AFDCI-AFDC ARREARS INTEREST          19 OSASI-OTHR STATE AFDC SPOUSAL INTEREST
6 AFMSI-AFDC MEDICAL ARRS INTEREST     20 OSTFI-OTHR STATE FC INTEREST
7 ASSPI-AFDC SPOUSAL ARRS INTEREST     21 OSFMI-OTHR STATE FC MEDICAL INTEREST
8 FCARI-FOSTER CARE ARREARS INTEREST
9 FCMSI-FOSTER CARE MEDICAL INTEREST
10 NFCRI-NON-IV-E FC ARREARS INTEREST
11 NFMSI-NON-IV-E FC MEDICAL INTEREST
12 MEDII-MEDICAID ARREARS INTEREST
13 OSTNI-OTHR STATE NPA INTEREST
14 OSSII-OTHR STATE SSI INTEREST

```

ENTER LINE NUMBER TO SELECT TYPE OF NEW EXTENSION: _____

ENTER-SELECT EXTN PF6-CURR SUP/ARR

ASEFON: SELECT EXTENSION - This screen lists the types of interest extensions (subaccounts) that can be created on KASES. This screen is used to select the extension associated with the support order for the case.

When adding an interest extension, the system will return an error message at the bottom of the screen if the extension is inappropriate for that particular case type.

The processing option for this screen is shown below.

ENTER-SELECT EXTN - Type the appropriate line number for the selected interest extension in the ENTER LINE NUMBER TO SELECT TYPE OF NEW EXTENSION field and press ENTER. The Create Order Extension screen (ASEFOG) displays.

PF6-CURR SUP/ARR - To add a current support or arrearage extension to the system, press PF6. The Select Extension screen (ASEFOF) displays. See the previous page for instructions for completing this screen.

ARREARAGE ROLLOVER

When a case changes IV-D status, the following arrearage rollovers will occur.

NPA/MA/TCC/NIVD to AFDC

NPA1A - AFDCA
SSI1A - no rollover
MSA1A - AFMSA
SSP1A - ASSPA
OSSIA - no rollover
OSTNA - OSTAA
OSNMA - OSAMA
OSSPA - OSASA

NPA/MA/TCC/NIVD to FC

NPA1A - FCARA
SSI1A - no rollover
MSA1A - FCMSA
SSP1A - no rollover (subaccount closes)
OSTNA - OSTFA
OSNMA - OSFMA
OSSIA - no rollover
OSSPA - no rollover

NPA/MA/TCC/NIVD to NFC

NPA1A - NFCRA
SSI1A - no rollover
MSA1A - NFMSA
SSP1A - no rollover (subaccount closes)

NFC to FC

NFCRA - FCARA
NFMSA - FCMSA

PAYEE CHANGES

When the client changes, the following rollovers will occur.

NPA1A - NPA2A
SSI1A - SSI2A
MSA1A - MSA2A
SSP1A - no rollover (subaccount closes)

June 5, 1997

Page Eight

DCSE can not collect spousal support if the payee named in the court order is not the CP in the IV-D case. Therefore, if the CP for whom the spousal support was ordered is no longer receiving IV-D services for the children and spousal support and child support were ordered in the same support order, DCSE can no longer collect the spousal support. A Notice of Change in Assignment or Authority to Collect (MN) must be completed to direct the payment of the spousal support to the appropriate person. (For a Ballard, Fayette, or Graves County order, refer the case to the contracting official for a judicial payee change of spousal support.)

For NPA/MA/TCC/NIVD cases, caseworkers will receive a message on the UPDATE PARTICIPANT TYPE screen (ASEC8A) that CSSP exists when a new CP is added. An example of this warning message is shown below.

ASEC8A 300X008		K A S E S	
05/16/97 11:20:57		UPDATE PARTICIPANT TYPE	
AP NAME	MR.	MPI	IV-D #
CL NAME	MRS.	MPI	WRKR #

PARTICIPANT NAME		MISS	
----- PARTICIPANT IDENTIFICATION -----			
PARTICIPANT TYPE	CLI_	MPI #	
RELATION TO CASE	OTHR	SSN	
PARTICIPANT STATUS	A	SEX U	RACE UN
		BIRTHDATE	

----- PARTICIPANT MAILING ADDRESS -----			
STREET 1	1 CAPITAL AVE		
STREET 2			
APT #			
CITY	FRANKFORT	ST	KY
ZIP CODE	40621	PHONE	

W: ACTIVE CSSP - PRESS PF9/PF2 TO CONTINUE	
PF2-AFDC DATA	PF9-UPDATE CASE

If the new CP is receiving IV-D services for all the children in the case, press PF9/PF2 to continue. **KASES will close the CSSP subaccount.** A MN or judicial payee change must be completed.

If the CP for whom the CSSP was ordered continues to receive IV-D services for at least one of the children, then do not press PF9/PF2

June 5, 1997

Page Nine

to continue. The children for whom the new CP will be receiving IV-D services is inactivated from the existing case. A new case must be created for the new CP and the children for whom he/she is receiving IV-D services.

For K-TAP cases, caseworkers will continue to receive the AF72 (AFDC Payee Change) Worklist Message. Caseworkers are to check to see if there was an existing CSSP subaccount. The interface will close the CSSP subaccount, but caseworkers must complete the MN or judicial payee change as needed.

PAYOFF HIERARCHY

A payment that is received and posted in the current month will be allocated in the following manner:

If there are no overrides, allocate the payment proportionately to all of the NCPs' open IV-D cases with CSUP and CSSI due.

If money remains, allocate the payment proportionately to all of the NCPs' open IV-D cases with CSMS due.

If money remains, allocate the payment proportionately to all of the NCPs' open IV-D cases with CSSP due.

If money remains, allocate an amount, up to the ordered amount, to each arrearage subaccount which has an ordered amount and frequency, oldest order first.

If the arrearage subaccounts resulted from the same order or if there is no ordered amount and frequency, the following payoff hierarchy is followed:

1. NPA1A . . . NPA 1 Arrears
2. SSI1A . . . SSI 1 Arrears
3. MSA1A . . . NPA 1 Medical Support Arrears
4. SSP1A . . . NPA Spousal Support Arrears
5. AFDCA . . . AFDC Arrears
6. AFMSA . . . AFDC Medical Support Arrears
7. ASSPA . . . AFDC Spousal Support Arrears
8. FCARA . . . Foster Care Arrears
9. FCMSA . . . Foster Care Medical Support Arrears
10. NFCRA . . . Non-IV-E Foster Care Arrears
11. NFMSA . . . Non-IV-E Foster Care Medical Support Arrears

June 5, 1997

Page Ten

12. NPA2A NPA 2 Arrears
13. SSI2A SSI 2 Arrears
14. MSA2A NPA 2 Medical Support Arrears
15. MEDIA Medicaid Arrears
16. APFEA AP Blood testing Fee
17. OSTNA Other State NPA Arrears
18. OSSIA Other State SSI Arrears
19. OSNMA Other State NPA Medical Arrears
20. OSSPA Other State NPA Spousal Support Arrears
21. OSTAA Other State AFDC Arrears
22. OSAMA Other State AFDC Medical Arrears
23. OSASA Other State AFDC Spousal Support Arrears
24. OSTFA Other State FC Arrears
25. OSFMA Other State FC Medical Arrears
26. OSFEE Other State Fees
27. VOL Voluntary
28. VLEX NPA Voluntary Excess

If a payment is received in a previous month and posted in the current month, the payment is distributed according to the payoff hierarchy starting with NPA1A.

ESCROW

If the case is in an AFDC IV-D status, payments distributed to CSMS and CSSP are included in the calculation for Escrow.

DOCUMENTS

The following documents have been revised to include the new current support subaccounts. A copy of each document is attached to this memo.

Custodial Parent Notification of Completed Action (Form CS-32), Administrative Delinquency Letter (Form CS-36.1), Advance Notice of Withholding of Earnings (Form CS-42), Noncustodial Parent Collection Notification (Form CS-45), Order to Withhold Earnings (Form CS-89), and Change in Order to Withhold Earnings (Form CS-90).

The field for current support will include both CSUP and CSSI amounts. Therefore, there will not be a separate field on the documents for CSSI. There will be a separate field for CSMS and a separate field for CSSP.

Caseworkers must complete a MN or judicial payee change to direct the payment of spousal support to the now inactive CP. If a wage assignment is in affect, then additional casework is required.

If there are at least two children in the case, a CSSP subaccount exists, and only one child goes into Foster Care, a new case must be created for the Foster Care child. The child that did not go into Foster Care remains in the original case and the CSSP subaccount remains open.

When a child in an existing case goes into Foster Care, additional steps must be taken if the case has a CSSI subaccount.

ASEC8A 300X008		K A S E S	
05/16/97 11:32:45		UPDATE PARTICIPANT TYPE	
AP NAME		MPI #	IV-D #
CL NAME		MPI #	WRKR #

PARTICIPANT NAME	KY FOSTER CARE	SYS ACCT
------------------	----------------	----------

PARTICIPANT IDENTIFICATION	
PARTICIPANT TYPE	CLI_
RELATION TO CASE	OTHR
PARTICIPANT STATUS	A
MPI #	00000000
SSN	
SEX	U
RACE	UN
BIRTHDATE	

PARTICIPANT MAILING ADDRESS	
STREET 1 W: NO MAILING ADDRESS AVAILABLE	
STREET 2	
APT #	
CITY	ST
ZIP CODE	PHONE

W: ACTIVE CSSI, CASE ACCOUNT HELD - PRESS PF9/PF2 TO CONTINUE
 PF2-AFDC DATA PF9-UPDATE CASE

If there is one child in the case, a CSSI subaccount exists, and the child goes into Foster Care (IV-E or non-IV-E), the CSSI subaccount must be changed to CSUP using the order entry process. If there is a SSI1A subaccount, the balance must be deleted from SSI1A and added to FCARA or NFCRA. If the FCARA or NFCRA subaccount already exists, the existing balance is not replaced with the SSI1A balance. The SSI1A balance must be added to the existing FCARA or NFCRA using the

June 5, 1997

Page Eleven

If an arrearage amount is printed on a document, that arrearage amount will include the new arrearage subaccounts. The total arrearages will be listed as one lump sum.

Besides the previously listed documents, the following documents print the arrearage amount: Order to Withhold (Form CS-68), Unemployment Insurance Agreement (Form CS-76), and Notice of Claim (NOC).

FOSTER CARE

When a child in an existing case goes into Foster Care, additional steps must be taken if the case has a CSSP subaccount. If the child going into Foster Care is the only child in the case and the case has a CSSP subaccount, a warning message will display on the UPDATE PARTICIPANT TYPE screen (ASEC8A).

ASEC8A		K A S E S	
05/16/97 11:20:57		UPDATE PARTICIPANT TYPE	
AP NAME	MR.	MPI #	IV-D #
CL NAME	MRS.	MPI #	WRKR #

PARTICIPANT NAME	KY FOSTER CARE	SYS ACCT
------------------	----------------	----------

----- PARTICIPANT IDENTIFICATION -----	
PARTICIPANT TYPE	CLI_ MPI #
RELATION TO CASE	SSN
PARTICIPANT STATUS	SEX U RACE UN
	BIRTHDATE

----- PARTICIPANT MAILING ADDRESS -----	
STREET 1 W: NO MAILING ADDRESS AVAILABLE	
STREET 2	
APT #	
CITY	ST
ZIP CODE	PHONE

W: ACTIVE CSSP - PRESS PF9/PF2 TO CONTINUE	
PF2-AFDC DATA	PF9-UPDATE CASE

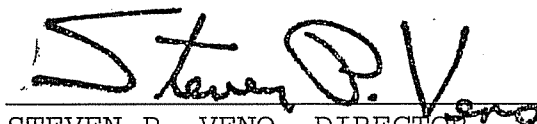
KASES will close the CSSP subaccount and any existing SSP1A subaccount when PF2 or PF9 is pressed.

ADJUSTMENT AMOUNT field. The caseworker then releases the hold on the case account statement.

If there are two or more children in the case, a CSSI subaccount exists, and only one child goes into Foster Care (IV-E or non-IV-E), the child(ren) that did not go into Foster Care remains in the original case and the CSUP and/or the CSSI subaccount(s) remains open. A new case is created for the Foster Care child. Caseworkers must determine which current support and arrearage subaccounts are appropriate for each case.

Questions about determining if a CSSI, CSMS, or CSSP subaccount are to be created to their area office manager or supervisor. Questions about creating a CSSI, CSMS, CSSP, or associated arrearage subaccount on KASES are to be referred to the KASES Help Desk. The KASES Help Desk can be contacted at 502-564-5339 or 1-800-443-2705.

DCSE STAFF AND CONTRACTING OFFICIAL STAFF ARE TO SAVE AND FILE THIS MEMO FOR FUTURE REFERENCE.



STEVEN P. VENO, DIRECTOR
DIVISION OF CHILD SUPPORT ENFORCEMENT

Attachments

Obsolete: KASES Network Memo No. 24 (2/18/94)

Cross References: Action Memorandum 94-09 (7/12/94)
Information Release No. 576 (7/12/94)

Retention: Until Superseded

Inquiries: DCSE Staff - Supervisors
IV-D Agents - Area Office Managers

COMMONWEALTH OF KENTUCKY
CABINET FOR FAMILIES AND CHILDREN
An Equal Opportunity Employer M/F/D
CUSTODIAL PARENT NOTIFICATION OF COMPLETED ACTION

TO: _____ Date: _____
Noncustodial Parent or Obligor: _____
IV-D Number: _____

The Cabinet for Families and Children (CFC) has successfully completed administrative or judicial action to

_____ establish paternity	_____ make support payable to CFC
_____ set child support	_____ enforce/collect past due support
_____ order medical support	

on behalf of

The noncustodial parent or obligor named above has been ordered to pay the amount(s) listed below to CFC beginning _____.

Current Child Support Payment:	\$ _____	per _____
Current Medical Support Payment:	\$ _____	per _____
Current Spousal Support Payment:	\$ _____	per _____

IF YOU ARE NOW RECEIVING SUPPORT PAYMENTS AND AN ASSISTANCE PAYMENT, YOU ARE REQUIRED TO FORWARD ALL SUPPORT PAYMENTS TO THE DIVISION OF CHILD SUPPORT ENFORCEMENT. WRITE THE IV-D NUMBER SHOWN ABOVE ON EACH SUPPORT PAYMENT AND SEND IT TO THE ADDRESS BELOW.

If support payments received by CFC are greater than the assistance payment, the difference, up to the ordered obligation amount, will be forwarded to you.

If you have a checking or savings account and want your support payments deposited electronically, go to your bank and ask for a DIRECT DEPOSIT SIGN-UP FORM (Form 1199A). Complete this form and send your copy to this address: DIVISION OF CHILD SUPPORT ENFORCEMENT, P. O. BOX 2150, FRANKFORT, KY 40602-2150, ATTENTION: EFT COORDINATOR. If your account number or bank changes, use this same address to notify our office of the change(s).

If you have any questions, use the information shown below to contact our office.

Division of Child Support Enforcement

Telephone: _____

CS-32 (Rev. 4/97)

"CHILDREN FIRST"

COMMONWEALTH OF KENTUCKY
CABINET FOR FAMILIES AND CHILDREN
An Equal Opportunity Employer M/F/D

ADMINISTRATIVE DELINQUENCY LETTER

Date: _____

Children: _____

IV-D #: _____

Our records show that you are behind in your support payments. You have been ordered to pay support as follows:

Current Child Support:	\$ _____	per _____
Current Medical Support:	\$ _____	per _____
Current Spousal Support:	\$ _____	per _____
Weekly Arrearage Payment:	\$ _____	per _____
Biweekly Arrearage Payment:	\$ _____	per _____
Semimonthly Arrearage Payment:	\$ _____	per _____
Monthly Arrearage Payment:	\$ _____	per _____

\$ _____ past-due support is due for periods of _____.

This amount was ordered by _____
effective ____/____/____.

You must begin paying your support immediately. You have an appointment at the time and place listed below to discuss your past-due support.

DATE: ____/____/____

TIME ____:____

LOCATION: _____

Your appointment is with _____.

If you do not keep your appointment or contact our office, enforcement action to collect the past-due support you owe may be taken pursuant to Kentucky Revised Statutes 405.405 through 405.991.

Sincerely,

Division of Child Support Enforcement
Telephone: _____

CS-36.1 (Rev. 6/97)

"CHILDREN FIRST"

COMMONWEALTH OF KENTUCKY
CABINET FOR FAMILIES AND CHILDREN
An Equal Opportunity Employer M/F/D

ADVANCE NOTICE OF WITHHOLDING OF EARNINGS

Date: _____
IV-D Number(s): _____

Children: _____

Kentucky Revised Statute (KRS) 405.467(2) allows the Cabinet for Families and Children (CFC) to begin withholding of earnings when an arrearage equal to one month's support obligation exists. Earnings can be withheld to satisfy the current support obligation plus any past-due support without returning to court.

KRS 405.467(3) requires CFC to issue an order to an employer to withhold from an employee's wages and to pay to the insurer the employee's share of the health insurance premium (if any) for health insurance coverage for the parent's child(ren). The withholding order is issued whenever a parent has been ordered to provide health insurance for a child, the child is eligible for enrollment in a health insurance plan which is available through the parent's employer, but the parent failed to enroll the child as ordered.

You have been ordered to pay support as shown below.

Current Child Support:	\$ _____	per _____
Current Medical Support:	\$ _____	per _____
Current Spousal Support:	\$ _____	per _____
Poundage (If ORDERED)	\$ _____	per _____

You owe an arrearage in the amount of \$ _____.

THIS MAY NOT BE THE TOTAL AMOUNT OWED TO THE CABINET OR TO THE CUSTODIAL PARENT FOR PAST-DUE SUPPORT.

The total amount which can be withheld from your disposable earnings (earnings after taxes) cannot exceed the maximum amount permitted by the federal Consumer Credit Protection Act (CCPA). These maximum amounts are as follows:

- 60 percent if you are not supporting a second family;
- 50 percent of your disposable earnings if you are supporting a second family (a spouse and/or a dependent child);
- 55 or 65 percent if you owe support that is 12 weeks or more past due. (The percentages above increase by 5 percent when you owe an arrearage that is 12 weeks or more past due.)

PAYMENT OF THE TOTAL ARREARAGE WILL NOT PREVENT WITHHOLDING OF CURRENT SUPPORT.

() You have been ordered to provide health care coverage for your child(ren), a health care plan is available through your employer, and you have failed to enroll your child(ren). Therefore, your employer will be notified to enroll your child(ren) in a health insurance plan and withhold from your wages your share (if any) of the premium for health insurance coverage. This amount will be paid to the insurer by your employer. The only exception is if the combined amount owed for current plus past-due support, plus your share of the health insurance premium, exceeds the maximum amount (based on CCPA limits) which can be withheld from your disposable earnings.

If your share of the health insurance premium, in addition to your current support obligation plus arrearage payment, exceeds the maximum amount which can be withheld, your employer will be advised not to withhold any wages for the health insurance premium. This is pursuant to KRS 405.467(6) which states that if the total amount to be withheld exceeds CCPA limits, current and past-due child support must be satisfied before medical support.

You have the right to contest this withholding ONLY on the basis of a mistake of fact. A mistake of fact means that: (1) either the current support obligation or arrearage (past due support) shown on this notice is wrong, or (2) the Division of Child Support Enforcement (DCSE) has identified the wrong person, or (3) your child(ren) already has health insurance coverage. If your child(ren) has health insurance coverage, provide DCSE with proof of this coverage. PROOF OF COVERAGE IS A COPY OF THE HEALTH INSURANCE POLICY OR A COPY OF THE INSURANCE CARD. THIS PROOF MUST BE PROVIDED WITHIN TEN DAYS OF THE RECEIPT OF THIS NOTICE.

If you believe a mistake of fact exists, you must contact DCSE at the address shown below WITHIN TEN DAYS OF THE RECEIPT OF THIS NOTICE. At that time an appointment will be scheduled for you to present proof of the error you believe exists.

After you have had the chance to present your case to DCSE and after the facts have been evaluated, DCSE will determine if the withholding will occur. You will be notified of DCSE's decision within 45 days from the date you receive this notice. If it is determined that the withholding will occur, you will be advised of the date the withholding will begin.

IF YOU DO NOT CONTACT DCSE TO CONTEST THE WITHHOLDING WITHIN TEN DAYS OF THE RECEIPT OF THIS NOTICE AND PROVE THAT A MISTAKE OF FACT EXISTS, YOUR EMPLOYER WILL BE ADVISED TO BEGIN WITHHOLDING.

You will receive a copy of the Order to Withhold Earnings that is sent to your employer. If you change jobs, this withholding remains in effect. If you change employers or become unemployed, YOU MUST CONTACT OUR OFFICE IMMEDIATELY

Withholding of earnings does not keep CFC from recovering arrearages by intercepting federal and/or state tax refunds, reporting delinquent accounts to consumer reporting agencies, filing liens on personal and/or real property and/or requesting the denial or suspension of your driver's license.

Action to begin withholding of earnings will be stopped if DCSE verifies that judicial proceedings for enforcement of your support obligation have already been started.

Sincerely,

Division of Child Support Enforcement

Telephone: _____

COMMONWEALTH OF KENTUCKY
CABINET FOR FAMILIES AND CHILDREN
An Equal Opportunity Employer M/F/D

NONCUSTODIAL PARENT COLLECTION NOTIFICATION

TO:

Date: _____

Custodial Parent: _____

Child(ren): _____

IV-D Number: _____

Pursuant to Kentucky Revised Statute (KRS) Chapter 205, the Division of Child Support Enforcement has completed action to direct your support payments to the Cabinet for Families and Children (CFC). Your support payments include poundage if ordered by a court of law. They also include spousal support (alimony) if ordered and if your spouse or former spouse is living with the child(ren) who is receiving child support services.

() Send your support payments to:

This agency will forward your support payments to our office.

() Send your support payments to the address checked below.

() Division of Child Support Enforcement _____

() Division of Child Support Enforcement, P. O. Box 2150, Frankfort, KY 40602-2150

The amount of each payment and the date you are to begin paying are shown below. YOU WILL BE NOTIFIED WHEN YOU NO LONGER NEED TO MAKE YOUR PAYMENTS TO CFC.

Current Child Support Payment:	\$ _____	per _____
Current Medical Support Payment:	\$ _____	per _____
Current Spousal Support Payment:	\$ _____	per _____

Weekly Arrearage Payment:	\$ _____	per week
Biweekly Arrearage Payment:	\$ _____	every two weeks
Semimonthly Arrearage Payment:	\$ _____	twice per month
Monthly Arrearage Payment:	\$ _____	every month

Beginning Date: _____

These support payments are for the child(ren) named above as they are receiving child support services. If the order includes support for other children, it is your responsibility to send the other children their share of the support.

Payment instructions are enclosed with this letter. KRS 205.750 STATES THAT CFC CANNOT GIVE YOU CREDIT FOR ANY PAYMENTS YOU SEND TO THE CUSTODIAL PARENT AFTER THE BEGINNING DATE SHOWN ABOVE. You will owe past-due support if you do not send your support payments to the address shown above.

Sincerely,

Division of Child Support Enforcement

Telephone: _____

CS-45 (Rev. 6/97)

"CHILDREN FIRST"

COMMONWEALTH OF KENTUCKY
CABINET FOR FAMILIES AND CHILDREN
"An Equal Opportunity Employer M/F/D"

* * * ORDER TO WITHHOLD EARNINGS * * *

IV-D Number(s):

Child(ren):

RE: Your Employee:

Social Security Number:

File Number:

Pursuant to 45 Code of Federal Regulations (CFR) Section 303.100 and Kentucky Revised Statute (KRS) 405.467, you are ordered to withhold earnings from the employee named above according to the following instructions. Pursuant to federal regulations and KRS 405.467(7), you are liable to the Cabinet for Families and Children (CFC) for any amount which you are ordered to withhold but fail to withhold.

1. Withhold from the employee's disposable income*:
current child support in the amount of \$ _____ per _____,
current medical support in the amount of \$ _____ per _____,
current spousal support in the amount of \$ _____ per _____,
an arrearage payment in the amount of \$ _____ per _____,
and poundage in the amount of \$ _____ per _____, or the
maximum amount allowable under the Consumer Credit Protection Act (CCPA) at 15
U.S.C. 1673(b), whichever is less, for child support.

*Disposable income is defined in KRS 427.005(2) as "that part of the earnings of any individual remaining after the deduction from those earnings of any amounts required by law to be withheld."

() The arrearage payment is for arrears which are 12 weeks or more past due.

THE TOTAL AMOUNT OF EARNINGS WITHHELD FOR CHILD SUPPORT FROM THE EMPLOYEE'S DISPOSABLE INCOME MUST NOT EXCEED THE LIMITS IMPOSED BY CCPA. (These limits are defined in item 10 on page 3 of this order.)

2. Begin withholding NO LATER THAN the first pay period that occurs 14 days after _____.
3. Mail the withheld amount within ten days of the date the payment is withheld according to instructions on the following page. ALL PAYMENTS MUST BEAR THE IV-D NUMBER(S) SHOWN ABOVE AND THE DATE THE PAYMENT WAS WITHHELD.

- () a. Send the total amount withheld to _____ for forwarding to the Cabinet for Families and Children at the address checked below.
- () b. Send the total amount withheld to _____ so that current support may be sent to _____ and arrearage payments may be sent to CFC at the address checked below.
- () Cabinet for Families and Children, Division of Child Support Enforcement, 275 East East Main Street, Frankfort, KY 40621.
- () Cabinet for Families and Children, Division of Child Support Enforcement, _____.

You must notify CFC promptly if the employee's employment ends. If known, you must provide the employee's last known address and the new employer's name and address {45 CFR § 303.100(f)(1)(x)}.

4. Send the total amount withheld to _____ for forwarding to _____ Send any further correspondence concerning this wage withholding to _____ at the address shown above.

You must promptly notify the person to whom payments are now payable if the employee's employment ends. If known, you must provide the new employer's name and address.

5. () The employee named on page one has been ordered to obtain health insurance coverage for the child(ren) listed on page one but has failed to comply with the order. Pursuant to KRS 405.467(3) and (5), you are ordered to enroll the child(ren) in the employee's health insurance plan and to withhold from the employee's disposable income and mail to the insurer the employee's share (if any) of the health insurance premium.

THE TOTAL AMOUNT OF EARNINGS WHICH CAN BE WITHHELD FROM THE EMPLOYEE'S DISPOSABLE INCOME FOR CURRENT AND PAST-DUE CHILD SUPPORT PLUS MEDICAL SUPPORT MUST NOT EXCEED THE APPLICABLE LIMIT IMPOSED BY CCPA. CCPA limits are provided in item 10 on page three.

IF THE AMOUNT TO BE WITHHELD FOR CURRENT AND PAST-DUE CHILD SUPPORT PLUS THE EMPLOYEE'S SHARE OF THE HEALTH INSURANCE PREMIUM EXCEED THE APPLICABLE CCPA LIMIT, DO NOT WITHHOLD ANY WAGES FOR THE EMPLOYEE'S SHARE OF THE HEALTH INSURANCE PREMIUM. This is pursuant to KRS 405.467(6) which states that if the total amount to be withheld exceeds the applicable CCPA limit, current and past-due child support must be satisfied before medical support.

Once the child(ren) has been enrolled in a health insurance plan, YOU MAY NOT DISENROLL THE CHILD UNLESS ONE OF THE FOLLOWING SITUATIONS EXISTS:

- you have been provided proof that the court or administrative order which ordered that the child be enrolled in a health care plan is no longer in effect;
- the child(ren) is or will be enrolled in comparable health care coverage and the new coverage will take effect no later than the date of disenrollment;

- you have eliminated family health care coverage for ALL of your employees; or
 - you have been provided proof that there has been an increase in the child support obligation and the amount of current and/or past-due child support plus medical support now exceeds the maximum amount which can be withheld based on the applicable CCPA limit.
6. This Order to Withhold Earnings is binding until further notice by CFC.
 7. Pursuant to 45 CFR § 303.100(f)(1)(ii), you have TEN DAYS FROM THE DATE YOUR EMPLOYEE IS PAID to send the amount withheld for current or past-due support to the address shown on page two.
 8. Pursuant to KRS 405.467(9), withholding of earnings shall not be grounds for firing, refusing to hire, or taking disciplinary action against the employee.
 9. A child support Order to Withhold Earnings has priority over any other attachment, execution, or assignment {KRS 405.467(8)}.
 10. If you receive more than one court or administrative wage withholding order for this employee, you must withhold current support for ALL orders up to the CCPA limit. Federal regulations now require CFC to ALLOCATE amounts available for withholding among ALL the families for whom the noncustodial parent is responsible and for which wage withholding is in effect. In other words, all the support obligations for one noncustodial parent are to receive a share of the amount withheld. If the CCPA limit has not been reached after current support for all orders has been withheld, you must withhold arrearages until all orders are satisfied or the applicable CCPA limit is reached, whichever is less {45 CFR § 303.100(a)(5)}.

The total amount which can be withheld from an employee's disposable earnings (earnings after taxes) cannot exceed one of the following CCPA limits:

- 50 percent of the employee's disposable earnings if the employee IS supporting a second family (a spouse and/or a dependent child),
 - 55 percent if the employee IS supporting a second family and owes back support that is 12 weeks or more past due,
 - 60 percent of the employee's disposable earnings if the employee IS NOT supporting a second family,
 - 65 percent if the employee IS NOT supporting a second family and owes back support that is 12 weeks or more past due. (Item 1 on page one identifies whether support is 12 weeks or more past due.)
11. If you employ more than one person whose earnings are subject to withholding or if you receive more than one wage withholding order on the same employee, you may combine the amounts due the Division of Child Support Enforcement into one transmittal {45 CFR § 303.100(f)(1)(vii)}. HOWEVER, YOU MUST IDENTIFY EACH PAYMENT BY PROVIDING THE FOLLOWING INFORMATION: EMPLOYEE NAME AND SOCIAL SECURITY NUMBER, IV-D NUMBER(S), THE SPECIFIC AMOUNT WITHHELD FOR EACH IV-D NUMBER, AND THE DATE EACH PAYMENT IS WITHHELD.
 12. You may deduct from the employee's wages the sum of one dollar for each payment made in order to recover administrative expenses. KRS 405.465 requires that this fee not be deducted from the child support obligation.

13. You may transmit withheld wages to the Division of Child Support Enforcement using the Electronic Funds Transfer (EFT) process. If you wish to transmit withheld wages using EFT, you must contact the Division's Accounting Branch at (502)564-2285, extension 440.

I am a designee of the Secretary of the Cabinet for Families and Children authorized to administer KRS 405.467.

Division of Child Support Enforcement

Telephone: _____

Date: _____

COMMONWEALTH OF KENTUCKY
CABINET FOR FAMILIES AND CHILDREN
An Equal Opportunity Employer M/F/D

* * * CHANGE IN ORDER TO WITHHOLD EARNINGS * * *

IV-D Number(s):

Child(ren):

RE: Your Employee:

Social Security Number:

File Number:

The Order to Withhold Earnings dated _____ is modified according to the following instructions. You are to implement the change(s) listed below NO LATER than the first pay period that occurs 14 days after the date on page 3 of this order.

- () 1. Withhold from the employee's disposable income*:
current child support in the amount of \$ _____ per _____,
current medical support in the amount of \$ _____ per _____,
current spousal support in the amount of \$ _____ per _____,
an arrearage payment in the amount of \$ _____ per _____, and
poundage in the amount of \$ _____ per _____, or the maximum amount
allowable under the Consumer Credit Protection Act (CCPA) at 15 U.S.C.
1673(b), whichever is less, for child support. (CCPA limits are defined
below.)

*Disposable income is defined in KRS 427.005(2) as "that part of the earnings
of any individual remaining after the deduction from those earnings of any
amounts required by law to be withheld."

() The arrearage payment is for arrears which are 12 weeks or more past due.

THE TOTAL AMOUNT OF EARNINGS WITHHELD FOR CHILD SUPPORT FROM THE EMPLOYEE'S DISPOSABLE
INCOME MUST NOT EXCEED THE APPLICABLE CCPA LIMIT DEFINED BELOW.

- 50 percent of the employee's disposable earnings if the employee IS supporting
a second family (a spouse and/or a dependent child);
- 55 percent if the employee IS supporting a second family and owes back support
that is 12 weeks or more past due.
- 60 percent of the employee's disposable earnings if the employee IS NOT
supporting a second family;
- 65 percent if the employee IS NOT supporting a second family and owes back
support that is 12 weeks or more past due.

() 2. End the withholding of earnings.

() 3. Other _____

MAIL THE AMOUNT WITHHELD FOR CURRENT AND/OR PAST-DUE SUPPORT WITHIN 10 DAYS OF THE DATE THE PAYMENT IS WITHHELD according to the instructions that follow. ALL PAYMENTS MUST BEAR THE IV-D NUMBER(S) LISTED ON PAGE ONE AND THE DATE THE PAYMENT WAS WITHHELD.

() Send the total amount withheld to:

_____ for forwarding to the Cabinet
for Families and Children (CFC) at the address checked below.

* * * * *

() Cabinet for Families and Children, Division of Child Support Enforcement, 275 East Main Street, Frankfort, KY 40621.

() Cabinet For Families and Children, Division of Child Support Enforcement, _____

* * * * *

- () 1. The employee named on page one has been ordered to obtain health insurance coverage for the child(ren) listed on page one but has failed to comply with the order. Pursuant to KRS 405.467(3) and (5), you are ordered to enroll the child(ren) in the employee's health insurance plan and to withhold from the employee's disposable income and mail to the insurer the employee's share (if any) of the health insurance premium.

THE TOTAL AMOUNT OF EARNINGS WHICH CAN BE WITHHELD FROM THE EMPLOYEE'S DISPOSABLE INCOME FOR CURRENT AND PAST-DUE CHILD SUPPORT PLUS MEDICAL SUPPORT MUST NOT EXCEED THE APPLICABLE CCPA LIMIT.

IF THE AMOUNT TO BE WITHHELD FOR CURRENT AND PAST-DUE CHILD SUPPORT PLUS THE EMPLOYEE'S SHARE OF THE HEALTH INSURANCE PREMIUM EXCEEDS THE APPLICABLE CCPA LIMIT, DO NOT WITHHOLD ANY WAGES FOR THE EMPLOYEE'S SHARE OF THE HEALTH INSURANCE PREMIUM. This is pursuant to KRS 405.467(6) which states that if the total amount to be withheld exceeds the applicable CCPA limit, current and past-due child support must be satisfied before medical support.

- () 2. The total amount of current plus past-due child support to be withheld has DECREASED. If you were previously ordered to enroll a child(ren) for health insurance coverage BUT COULD NOT because the employee-paid share of the cost of providing coverage plus the amount withheld for current support and arrearages exceeded the applicable CCPA limit, you must redetermine whether the child(ren) can now be enrolled.
- () 3. The total amount of current plus past-due child support to be withheld has INCREASED. If you were previously ordered to enroll a child(ren) for health insurance coverage and the child(ren) was enrolled, you must redetermine if the employee-paid share of the cost of providing health insurance plus amounts withheld for current support and arrearages now exceed the applicable CCPA limit. If the total exceeds the applicable CCPA limit, the employee-paid share of the cost of providing coverage for the child(ren) IS NOT TO BE DEDUCTED.

Once the child(ren) has been enrolled in a health insurance plan, YOU MAY NOT DISENROLL THE CHILD UNLESS ONE OF THE FOLLOWING SITUATIONS EXISTS:

- you have been provided proof that the court or administrative order which ordered that the child be enrolled in a health insurance plan is no longer in effect;
- the child(ren) is or will be enrolled in comparable health insurance coverage and the new coverage will take effect no later than the date of disenrollment;
- you have eliminated family health care coverage for ALL of your employees; or
- you have been provided proof that there has been an increase in the child support obligation and the amount of current and/or past-due child support plus medical support now exceeds the maximum amount which can be withheld based on CCPA limits.

You may transmit withheld wages to the Division of Child Support Enforcement using the Electronic Funds Transfer (EFT) process. If you wish to transmit withheld wages using EFT, you must contact the Division's Accounting Branch at (502)564-2285, extension 440.

I am a designee of the Secretary of the Cabinet for Families and Children authorized to administer KRS 405.467.

Division of Child Support Enforcement

Telephone _____

Date _____

